

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.		1032-P01445US3		
		First Named Inventor		BOTICH ET AL, Michael J.		
		Title	Catheter Insertion Device with Retractable Needle			
		Express Mail Label No.		EV301974868US		Date Mailed: December 3, 2003
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				ADDRESS TO: Commissioner of Patents Mail Stop Patent Application Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27 3. <input checked="" type="checkbox"/> Specification (Total Pages [44]) <div style="margin-left: 20px;"> (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure </div>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <div style="margin-left: 20px;"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies </div>		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> 17497 U.S. PTO 10/727363 </div>		
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) (Total Sheets [16]) <div style="margin-left: 20px;"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </div>		5. <input checked="" type="checkbox"/> Oath or Declaration (Total Pages [2]) <div style="margin-left: 20px;"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </div>				
6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76		ACCOMPANYING APPLICATION PARTS		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and certification for non-publication under 35 U.S.C. 122 17. <input type="checkbox"/> Other: _____		

CONTINUING APPLICATION INFORMATION

This application is a **Continuation** of the following United States applications, each of which is incorporated herein by reference:

09/070,829, filed on April 30, 1998, 09/526,612, filed on March 16, 2000, PCT/US98/24103, filed on November 12, 1998 and PCT/US99/10609, filed on May 13, 1999.

PRIORITY APPLICATIONS

This application claims priority to the following application(s), each of which is hereby incorporated herein by reference.

U.S. Provisional Applications: 60/120,888 filed February 20, 1999, 60/094,801 filed July 31, 1998 and 60/065,347 filed November 12, 1997

CORRESPONDENCE ADDRESS

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13049 U.S. PTO



120303

FEE TRANSMITTAL**Complete if known**

Application Number: Not Yet Assigned

Filing Date: December 3, 2003

First Named Inventor: Botich et al

Group Art Unit:

Examiner Name:

Total Amt. of Payment: (1)+(2)+(3)= **\$856**

Attorney Docket Number: 1032-P01445US3

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:

- ☐ Charge indicated fees
☒ Charge additional fees
☒ Credit overpayments

to the account of DANN, DORFMAN, HERRELL & SKILLMAN

Deposit Account Number 04-1406

2. Payment enclosed:

Check in the amount of \$856**FEE CALCULATION**

1. FILING FEE

Fee Description

	Fee
Utility filing fee	<u>770</u>
Design filing fee	<u> </u>
Plant filing fee	<u> </u>
Reissue filing fee	<u> </u>

SUBTOTAL (1) \$770**FEE CALCULATION (continued)****ADDITIONAL FEES****Fee Description****Fee Paid**

Surcharge-late filing fee or oath	<u>0</u>
Surcharge - late provisional filing fee or cover sheet	<u> </u>
Extension for response within first month	<u> </u>
Extension for response within second month	<u> </u>
Extension for response within third month	<u> </u>
Extension for response within fourth month	<u> </u>
Notice of Appeal	<u> </u>
Filing a brief in support of an appeal	<u> </u>
Request for oral hearing	<u> </u>
Petition to revive unavoidably abandoned application	<u> </u>
Petition to revive unintentionally abandoned application	<u> </u>
Issue fee	<u> </u>
Petitions to the Commissioner	<u> </u>
Petitions related to provisional applications	<u> </u>
Submission of Information Disclosure Stmt.	<u> </u>
Recording each patent assignment per property	<u>0</u>
Other fee (specify) <u>Advance Order (10 copies)</u>	<u> </u>

SUBTOTAL (3) \$0

2.

		Paid		Extr		Fee
Total Claims	19	-20	=	0	x 18	= 0
Independent Claims	4	-3	=	1	x 86	= 86
Multiple Dependent (First presentation)						

SUBTOTAL (2) \$86

Submitted By:

Typed or

Printed Name Stephen H. ElandReg. Number 41,010Signature Date December 3, 2003

Deposit Account User ID

04-1406